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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application or Docket Number 10705238		
CLAIMS AS FILED – PART I OTHER THAN												
(Column 1)						lumn 2)		SMALL I	NTITY	OR		ENTITY
	FOR		NUMBER FILED		NUMBER EXTRA			RATE	FEE	l	RATE	FEE
(37 (	IC FEE CFR 1.16(a))		page 2		- Cont				s	OR		\$
(37 (	AL CLAIMS CFR 1.16(c))	'	minus 20 =		•			x \$=		OR	x s=	
	EPENDENT CLAIN CFR 1.16(b))	//S	minus	3 =				x \$=		OR	x s=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))								+ \$=		OR	+ \$=	
* If the difference in column 1 is less than zero, enter *0* in column 2.						-	TOTAL		OR	TOTAL		
CLAIMS AS AMENDED – PART II												
10251 06 (Column 1) (Column 2) (Column 3)						_	SMALL I	ENTITY	OR	OTHER THAN SMALL ENTITY		
MENDMENT A		CLAIN REMAIN AFTE AMENDI	ING R	Pi	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	· 55	Minu	s **	72			x s=		OR	x s=	
	Independent (37 CFR 1.16(b))	. 7	Minu	s **	6	= 4		x \$=		OR	x \$=	200
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ \$=	
							-	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	200
L		(Column			(Column 2)	(Column 3)			_			
IENDMENT B		CLAIN REMAIN AFTE AMENDN	ING R	PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	•	Minu	s **		=		x \$=		OR	x \$=	
	Independent (37 CFR 1.16(b))	*	Minu	S ***		=		x s=		OR	x \$=	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ \$=		OR	+ \$=	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIN REMAIN AFTE AMENDN	ING R	PI	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.16(c))	*	Minu	s "		=		x \$=		OR	x s=	_
	Independent (37 CFR 1.16(b))	*	Minu	\$ **	*	=		× \$=		OR	x \$=	
₹	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))							+ s=		OR	+ \$=	
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.